

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1. Date of Request: _____

2 Serial/Patent # 10/518711

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
✓ Other			\$ 100
	7 TOTAL AMOUNT OF REFUND		\$ 100

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation): _____

Treasury Check

Credit Deposit A/C #:

9 1 5 -- 0 0 3 0

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:

Winston Alvarez

TITLE:

SIGNATURE:

National Stage Processing

PHONE:

703-308-9140-206

OFFICE:

Paralegal Specialist

(703) 305-3421

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED:

DATE:

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: